PROPERTY TAX ASSISTANCE PROGRAM TOWN OF KENNEBUNKPORT Application Deadline—June 30, 2017

		ear from the State of Maine Pro : □ Yes: If yes, please comple □ No: If no, you are not elig	ete form bel	ow.
Name:		Home Phone Nu		
Property Address:				
Map, Block, and Lot Numb	per (on property tax bi	II):		
Mailing Address (if differer	nt than property addre	ss):		
E-mail Address:				
How many years have you	u been a full-time resid	dent of Kennebunkport?	_	
How many years at your o	current address?			
Select one option: App	d my refund by check ly my refund to next y	ear's taxes.		
Proof of residency in t	he municipality is ba	ased on one or more of the f	ollowing: Yes	No
I am a registered voter in the municipality.				
I pay motor vehicle excise tax in the municipality		lity.		
I pay income taxes in the				
The address on my drive	er's license is the sam	e as the address above.		
Required: If you are a	tenant in your home	, you must provide a copy of	f your lease) .
For assistance with the can appointment.	ompletion of this form	, please call Jen at 207-967-4	243 ext 108	to schedule
Please return form to:	Jennifer Lord, Trea	surer		
	6 Elm Street			
	P.O. Box 566	- 04040		
	Kennebunkport, Mi	= 04046		
REMINDERS:				
If a name have you at	tacked a convert vol	ur loggo?		
If a renter, have you at		o later than June 30, 2017.		
Refunds may be applied	ed to other outstand	ing town debts you may owe	.	
I declare that the respon	ses on this application	n are, to the best of my knowle	dge, true ar	nd correct:
Signature of Applicant		Date		



Town of Kennebunkport PO Box 566 Kennebunkport, ME 04046 Attn: Jennifer Lord



State of Maine Maine Revenue Services PO Box 9116 Augusta, ME 04332-9116

Maine Residents Property Tax Fairness Credit 2016 Release of Information Consent Form

I hereby authorize Maine Revenue Services (MRS) to provide information relative to my Maine Residents Property Tax Fairness Credit to the Town of Kennebunkport.

I understand that the information provided by MRS will include the full amount of the refund for which I was eligible.

Maine Revenue Services will provide the refund information only if this form has been signed by the refund recipient. The information so provided is intended to be used solely for the purpose of determining my eligibility under the Town of Kennebunkport's "Local Property Tax Assistance Program."

The Town of Kennebunkport agrees upon receipt of this form and under penalties of applicable law to hold all taxpayer information contained in this form in strict confidence and to use the information contained in this form strictly for the purposes stated herein.

To be completed by refund recipient:	
Social Security number:	Printed name
Address:	
Signature of refund recipient:	
Date signed:	
Office use only:	
Refund amount: Request to: State of Maine	Did not apply: Reply to: Town of Kennebunkport

Request to: State of Maine Maine Revenue Services Fax: (207) 624-9694 Tel: (207) 626-8475

Reply to: Town of Kennebunkport Treasurer's Office Fax: (207) 967-8470 Tel: (207) 967-4243 xt 108